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Image# 10930226789

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIW 3X	For Other	er Than An A	Authorized	Committe	ее		Office Us	e Only	
NAME OF COMMITTEE (in full)		MAILING LABI OR PRINT ₩		mple:If typing, the lines	type				
One Voice		<u> </u>							
ADDRESS (number and stree	1127 1	1th Street #225							
Check if different than previously reported. (ACC)	Sacran	nento				CA	95	5814	
2. FEC IDENTIFICATION	NUMBER 1		CITY 🛕		:	STATE		ZIPCODI	E 🛕
C00403071		3	. IS THIS REPORT		IEW N) OR		AMENDED (A)		
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Reports: October 15 Quarterly Reports: X Quarterly Reports: X Quarterly Reports: January 31 Quarterly Report(Non-eyear Only) (Moneyear Only) (M	port(Q1) (c) port(Q2) port(Q3) port(YE) (ear election electrons electron	PRE-Election Report for th El 30-Day Post -Election Report for th	ection on	J	(2C)	Gener Specia	ug 20 (M8) ep 20 (M9) oct 20 (M10) al (12G) al (12G)	in the State of	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
5. Covering Period	07	2009		through	12	3 1	2009	÷	
Type or Print Name of Treas	Malaa	to the best of m Im Burnstein	y knowledge a	nd belief it is	true, correct	and comple	te.		
Signature of Treasurer	lectronically Filed	by Malcolm	Burnstein			Date 0	1 29	2	2010
NOTE : Submission of false	, erroneous, or in	complete inform	nation may sub	ject the perso	on signing thi	s Report to	the penalties	of 2 U.S.	C 437g.
Office Use							FEC	FORM	_

FE6AN026

One Voice

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

Report Covering the Period:	
report extremily and a second	

From:

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м м 12

^D 31

2009

2/33

_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
. (a) Cash on Hand January 1 2009 Y Y Y		11971.21
(b) Cash on Hand at Begining of Reporting Period	30148.35	
(c) Total Receipts (from Line 19)	20428.00	52448.00
(d) Subtotal (add lines 6(b) and		
6(c) for Column A and Lines 6(a) and 6(c) for Column B)	50576.35	64419.21
Total Disbursements (from Line 31)	46597.09	60439.95
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3979.26	3979.26
Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
D. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 33

Write or Type Committee Name One Voice

Report Covering the Period:

From: 0.7

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^Y 2009

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
Contributions (other than loans) From: (a) Individuals/Persons Other			
Than Political Committees (i) Itemized (use Schedule A)	17460.00	48960.00	
(ii) Unitemized	1968.00	2488.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	19428.00	51448.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	1000.00	1000.00	
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	20428.00	52448.00	
Transfers From Affiliated/Other Party Committees	0.00	0.00	
3. All Loans Received	0.00	0.00	
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00	
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00	
to Federal candidates and Other Political Committees	0.00	0.00	
Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	
Transfers from Non-Federal and Levin Funds			
(a) Non-Federal Account (from Schedule H3)	0.00	0.00	
(b) Levin Funds (from Schedule H5)	0.00	0.00	
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00	
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	20428.00	52448.00	
. Total Federal Receipts (subtract Line 18(c) from Line 19)	20428.00	52448.00	

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 33

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	40507.00	EE 400 0E
	Expenditures	46597.09	55439.95
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	46597.09	55439.95
,	Transfers to Affiliated/Other Party	40007.00	35-63.35
	Committees	0.00	0.00
3.	Contributions to		
	Federal Candidates/Committeesand Other Political Committees	0.00	5000.00
	Independent Expenditure	0.00	0.00
5.	(use Schedule E) Coordinated Expenditures Made by Party		
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
		0.00	0.00
b.	Loan Repayments Made	0.00	0.00
7.	Loans Made	0.00	0.00
	Refunds of Contributions To:		
((a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
((d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9. (Other Disbursements	0.00	0.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
81.	Total Disbursements (add Lines 21(c), 22,		
•••	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	46597.09	60439.95
	25, 2 ., 25, 25, 27, 25(5), 25 414 55(5))	, , , , , , , , , , , , , , , , , , , ,	
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	46597.09	60439.95
	from Line 31)	40097.09	00439.93

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 33

III. Net Contributions/Operating Expenditures		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
33.	Total Contributions (other than loans) from Line 11(d), page 3)	20428.00	52448.00	
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00	
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	20428.00	52448.00	
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	46597.09	55439.95	
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	46597.09	55439.95	

FE6AN026

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 33 (check only one) X 11a 11b 11c 12
Any information copied from such Reports ar	d Statements may not be sold or used by any pers the name and address of any political committee to	ton for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) One Voice	the name and address of any political committee t	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Danny Bakewell		Date of Receipt
Mailing Address PO Box 561138		1 0 0 9 2 0 0 9
City	State Zip Code	Transaction ID: C2522868
Los Angeles	CA 90056-0180	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Bakewell Construction Gro-	Occupation Owner	
up Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Adrianne Black		Date of Receipt
Mailing Address 12257 Silva Pl		07 08 2009
City	State Zip Code	Transaction ID: C2389759
Cerritos	CA 90703-7651	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer PPLA	Occupation Healthcare Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Adrianne Black		Date of Receipt
Mailing Address 12257 Silva Pl		08 08 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C2443890
Cerritos	CA 90703-7651	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer PPLA	Occupation Healthcare Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
		1050.00

SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/33 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from s or for commercial purposes, o NAME OF COMMITTEE (One Voice	ther than using the name and add	not be sold or used by any persitress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Mid Adrianne Black Mailing Address 12257	Silva Pl		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Cerritos FEC ID number of contribu	State CA	Zip Code 90703-7651	Transaction ID: C2504377 Amount of Each Receipt this Period 25.00
Receipt For: Primary Other (specify) ▼	Occupation Healthcar	re Administrator Year-to-Date 300.00]
Full Name (Last, First, Mid Adrianne Black Mailing Address 12257			Date of Receipt 1 0 0 8 2 0 0 9
City	State	Zip Code	Transaction ID: C2531608
Cerritos	CA	90703-7651	Amount of Each Receipt this Period
FEC ID number of contributed rederal political committee.	rting		25.00
Name of Employer PPLA	Occupation Healthcar	n re Administrator	
Receipt For: Primary Ge Other (specify) ▼	neral Aggregate	Year-to-Date ▼ 300.00	
Full Name (Last, First, Mid Adrianne Black	dle Initial)		Date of Receipt
Mailing Address 12257	Silva Pl		11 08 2009
City	State	Zip Code	Transaction ID: C2540875
Cerritos	CA	90703-7651	Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	C		25.00
Name of Employer PPLA		re Administrator	
Receipt For: Primary Ge Other (specify) ▼	neral Aggregate	Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This	s Page (optional)		75.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 33 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) One Voice		
	Full Name (Last, First, Middle Initial) Adrianne Black		Date of Receipt
	Mailing Address 12257 Silva Pl		12 08 2009
	City	State Zip Code	Transaction ID: C2550231
	Cerritos	CA 90703-7651	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer PPLA	Occupation Healthcare Administrator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
_	Full Name (Last, First, Middle Initial) Kurt Brinkman	.1	Date of Receipt
	Mailing Address 1261 62nd St		09 20 2009
	City	State Zip Code	Transaction ID: C2501045
	Emeryville	CA 94608-2106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Intrepid Electronic Syste- ms	Occupation CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Sunil Bronsle	.1	Date of Receipt
	Mailing Address 6715 Manor Crest		12 08 2009
	City	State Zip Code	Transaction ID: C2567658
	Oakland	CA 94618	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Titan Pharmaceuticals	Occupation Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
Г			775.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 33 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions
One Voice		
Full Name (Last, First, Middle Initial) Howard L Fields, MD		Date of Receipt
Mailing Address 755 Euclid Ave City	State Zip Code	0 9 2 5 2 0 0 9 Transaction ID: C2504384
<u>Berkeley</u>	CA 94708-1348	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Ernest Gallo Clinic & Res- earch Inst	Occupation Scientist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Howard L Fields, MD		Date of Receipt
Mailing Address 755 Euclid Ave		10 / 05 / 2009
City	State Zip Code	Transaction ID: C2531601
Berkeley FEC ID number of contributing federal political committee.	CA 94708-1348	Amount of Each Receipt this Period 1000.00
Name of Employer Ernest Gallo Clinic & Res- earch Inst	Occupation Scientist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial) John P Gooding	1	Date of Receipt
Mailing Address PO Box 8400		08 07 4 2009
City	State Zip Code	Transaction ID: C2399929
Emeryville	CA 94662-0400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00
Name of Employer Quadric Group, Inc.	Occupation Consultant	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
	ıl)	7000.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 33 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for	nformation copied from such Reports and commercial purposes, other than using the AME OF COMMITTEE (In Full)	Statements mane name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	one Voice			
. <u>El</u>	ull Name (Last, First, Middle Initial) ihu M Harris			Date of Receipt
	ailing Address 1331 San Pablo Ave			09 20 2009
Ci B	ty erkeley	State CA	Zip Code 94702-1021	Transaction ID: C2501046 Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C		500.00
Na Se	ame of Employer elf employed	Occupation Consulta		
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
	ull Name (Last, First, Middle Initial) ulian Haywood			Date of Receipt
_	ailing Address 502 H Street, SW Suite 200			10 30 7 2009
Ci M	ty /ashington	State DC	Zip Code 20024	Transaction ID: C2536293
FE	EC ID number of contributing deral political committee.	C	20024	Amount of Each Receipt this Period 250.00
Na He	ame of Employer eather Podesta & Partners	Occupation Lobbyist		
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
	ıll Name (Last, First, Middle Initial) iilliam Kaiser			Date of Receipt
Ma	ailing Address 4 Beacon Way, #120	7		10 27 YYYY 2009
Ci	•	State	Zip Code	Transaction ID: C2536149
FE	ersey City C ID number of contributing deral political committee.	C	07304	Amount of Each Receipt this Period 500.00
Na Ka P.	ame of Employer aiser, Sauborn & Mair, C.	Occupation Attorney		
	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
SUB	TOTAL of Receipts This Page (optional)	1		1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 33 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and Stor for commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) One Voice		
Full Name (Last, First, Middle Initial) Alistair McElwee		Date of Receipt
Mailing Address 6363 Christie Avenue		09 20 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C2501042
Emeryville	CA 94608	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Alta Bates Summit Medical Center	Occupation Nurse	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Brian O'Donoghue		Date of Receipt
Mailing Address 1316 W Fletcher St Apt 2E		12 30 7 2009
City	State Zip Code	Transaction ID: C2567625
Chicago	IL 60657-6480	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Goldman Ismail, et al	Occupation Attorney	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) David Pong		Date of Receipt
Mailing Address 161 San Antonio Way		12 31 YYYY 12 31
City	State Zip Code	Transaction ID: C2570739
Sacramento	CA 95819-1927	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	900.00
Name of Employer State of California	Occupation State Employee	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	900.00	
SUBTOTAL of Receipts This Page (optional)		1650.00
TOTAL This Period (last page this line number of	· ·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 33 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) One Voice	Statements may not be sold or used by any persename and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Georgia W Richardson Mailing Address 6026 Ridgemont Dr City Oakland FEC ID number of contributing	State Zip Code CA 94619-3720	Date of Receipt M M
Receipt For: Primary Other (specify)	Occupation Real Estate Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Georgia W Richardson Mailing Address 6026 Ridgemont Dr		Date of Receipt 1 1 0 8 2 0 0 9
City	State Zip Code	Transaction ID: C2540874
Oakland FEC ID number of contributing federal political committee.	CA 94619-3720	Amount of Each Receipt this Period 250.00
Name of Employer Richardson Real Estate Receipt For: Primary General Other (specify) ▼	Occupation Real Estate Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Randal Roberson, Sr.		Date of Receipt
Mailing Address 809 Commons Drive		12 31 7 2009
City Sacramento	State Zip Code CA 95825	Transaction ID: C2570742
FEC ID number of contributing federal political committee.	CA 93025	Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Retired	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	1	1750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 33 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) One Voice	nd Statements ma the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Noah Sanni			Date of Receipt
Mailing Address 1815 State Street City	State	Zip Code	1 0 2 7 2 0 0 9 Transaction ID: C2536147
Watertown	NY	13601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Self employed	Occupatio Physicia		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Bernard S. Schlager			Date of Receipt
Mailing Address 145 Lark Lane			09 / 20 / 2009
City	State	Zip Code	Transaction ID: C2501047
Mill Valley FEC ID number of contributing federal political committee.	CA	94941-3570	Amount of Each Receipt this Period 500.00
Name of Employer Center for Lesbian & Gay Studies	Occupatio Deputy D		
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Stephen Simon			Date of Receipt
Mailing Address 435 Maripossa Ave	nue #209		12 15 2009
City	State	Zip Code	Transaction ID: C2567638
Los Angeles	CA	90020	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer City of Los Angeles		Coordinator	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional			1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 33 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
One Voice		T
Full Name (Last, First, Middle Initial) Jon B Streeter		Date of Receipt
Mailing Address 3125 Claremont Ave		09 20 YYYY 2009
City	State Zip Code	Transaction ID: C2501044
Berkeley	CA 94705-2707	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Keker & Van Nest, L.L.P.	Occupation Attorney	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)		Data of Bassint
Connie Tyler Mailing Address 2322 8th St		Date of Receipt
City	Ctata 7:- Cada	07 21 2009
City Berkeley	State Zip Code CA 94710-2311	Transaction ID: C2389761 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 347 10 2311	10.00
Name of Employer Self Employed	Occupation Piano Teacher	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Connie Tyler		Date of Receipt
Mailing Address 2322 8th St		08 21 2009
City	State Zip Code	Transaction ID: C2443893
Berkeley	CA 94710-2311	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Self Employed	Occupation Piano Teacher	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
SUBTOTAL of Receipts This Page (optional)	······	520.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Reports and	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 33 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) One Voice	the name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Connie Tyler		Date of Receipt
Mailing Address 2322 8th St		09 21 2009
City	State Zip Code	Transaction ID: C2504378
Berkeley	CA 94710-2311	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Self Employed	Occupation Piano Teacher	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Connie Tyler		Date of Receipt
Mailing Address 2322 8th St		M M / D D / Y Y Y Y Y 1 1 0 2 1 2 0 0 9
City	State Zip Code	Transaction ID: C2531610
Berkeley	CA 94710-2311	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Self Employed	Occupation Piano Teacher	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Connie Tyler		Date of Receipt
Mailing Address 2322 8th St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C2540868
Berkeley	CA 94710-2311	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Self Employed	Occupation Piano Teacher]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
SUBTOTAL of Receipts This Page (optional))	120.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 33 (check only one) X
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) One Voice	Statements may not be sold or used by any perso e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<u> </u>	Full Name (Last, First, Middle Initial) Connie Tyler Mailing Address 2322 8th St City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	Berkeley FEC ID number of contributing federal political committee.	CA 94710-2311	Amount of Each Receipt this Period
	Name of Employer Self Employed Receipt For: Primary General Other (specify)	Occupation Piano Teacher Aggregate Year-to-Date 220.00	
3.	Full Name (Last, First, Middle Initial) Connie Tyler Mailing Address 2322 8th St		Date of Receipt 1 2 2 1 2 0 0 9
	City Berkeley FEC ID number of contributing federal political committee.	State Zip Code CA 94710-2311	Transaction ID: C2550232 Amount of Each Receipt this Period 10.00
	Name of Employer Self Employed Receipt For: Primary General Other (specify)	Occupation Piano Teacher Aggregate Year-to-Date 220.00	
 :.	Full Name (Last, First, Middle Initial) Mal Warwick Mailing Address 2550 9th St Ste 103		Date of Receipt 0 8 1 7 2 0 0 9
	City Berkeley	State Zip Code CA 94710-2551	Transaction ID: C2443891 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	Occupation	1000.00
	Name of Employer Mal Warwick & Associates Receipt For: Primary General Other (specify) ▼	Owner/consultant Aggregate Year-to-Date 1000.00	
s	UBTOTAL of Receipts This Page (optional)		1020.00

	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) One Voice		
Full Name (Last, First, Middle Initial) Jerilynn Willis		Date of Receipt
Mailing Address 28 Don Timoteo Cour	rt	10 27 2009
City	State Zip Code	Transaction ID: C2531634
Sonoma	CA 95476	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Self employed	Occupation Consultant	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	500.00	
Full Name (Last, First, Middle Initial) William Kaiser		Date of Receipt
Mailing Address 4 Beacon Way, #120	7	0 1 1 1 2 0 1 0
City	State Zip Code	Transaction ID: C2568290
Jersey City	NJ 07304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Kaiser, Sauborn & Mair, P.C.	Occupation Attorney	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	* Earmarked Contribution: See Below
Full Name (Last, First, Middle Initial) ActBlue	<u> </u>	Date of Receipt
Mailing Address PO Box 382110		1 2 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C2568290B
Cambridge	MA 02238-2110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00401224	500.00
Name of Employer	Occupation Conduit total listed in Agg. field	
Receipt For:	Aggregate Year-to-Date ▼	[MEMO ITEM]
Primary General Other (specify) ▼	500.00	Note: Above Contribution earmarked through this organization.
SUBTOTAL of Receipts This Page (optional)		1000.00
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SCHEDULE A (FEC Form 3)	()		FOR LINE NUMBER: PAGE 18 / 33
ITEMIZED RECEIPTS	-,	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using			
NAME OF COMMITTEE (In Full) One Voice			
Full Name (Last, First, Middle Initial) Drug Policy Reform Fund Mailing Address 70 West 36th Stree City	t, 16th Floor	Zip Code	Date of Receipt M M M
New York	NY	10018	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C coo	0461236	1000.00
Name of Employer	Occupation	n	
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SCHEDULE B (FEC Form 3X)	Use sepa				LINE NUMBER: PAGE 20 / 33 conly one)											
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NAME OF COMMITTEE (In Full) One Voice																
Full Name (Last, First, Middle Initial) Electronic Federal Tax Payment System(E	Transaction ID: D179379 Date of Disbursement															
Mailing Address P O Box 173788	$\begin{array}{c c} & & & \\ \hline & & \\ \hline & & \\ \end{array} \begin{array}{c} & \\ \end{array} \begin{array}{c} \\ \\ $															
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	sphedule(s) FOR LINE NUMBER: PAGE 21 / 33							33						
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Mailing Address PO Box 826276				+	1 ^M 0	М	/ D.	1 9	9 /	Y	ž 0 Ď	9 ^Y			
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NAME OF COMMITTEE (In Full) One Voice															
Full Name (Last, First, Middle Initial) Employment Development Department	Transaction ID: D184110 Date of Disbursement 10 23 7 2009														
Mailing Address PO Box 826276						10 23 2009									
	State CA	Zip Code 94230-6276					Amou	nt o	f Each	n Dis	sburse	men	t this	Perio	od
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SCHEDULE B (FEC Form 3X)			٠,		IE NUMBE	-D.		D	\ <u></u>	04 /	22	
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Candidate Name				egory/ ype								
Senate President	ment For: Primary Other (specify)	General										
State: District:												
Full Name (Last, First, Middle Initial) Patrick J. Kozlowski Accountancy Corp.					Date	of Dis	sburse	D1834 ement				
Mailing Address 1127 11th St Ste 225					1 ^M 0	M /	٥2	7 /	ž	0 0 9) [*]	
City Sacramento	State Zip C CA 958	ode 14-3809			Amou	unt of	Each	Disburse	emen	t this I	Perio	od
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Committee accounting service			_	01								
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State: District:												
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 25/33 Use separate schedule(s) (check only one) for each category of the 21b 22 23 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) One Voice Full Name (Last, First, Middle Initial) Transaction ID: D185767 Patrick J. Kozlowski Accountancy Corp. Date of Disbursement 2009 Mailing Address 1127 11th St Ste 225 City State Zip Code Amount of Each Disbursement this Period 95814-3809 Sacramento CA 839.06 Purpose of Disbursement Committee accounting service 001 Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: D179865 Patrick J. Kozlowski Accountancy Corp. Date of Disbursement 0 8 28 2009 Mailing Address 1127 11th St Ste 225 City State Zip Code Amount of Each Disbursement this Period 95814-3809 Sacramento CA 1000.00 Purpose of Disbursement Committee accounting service 001 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: D177651 Patrick J. Kozlowski Accountancy Corp. Date of Disbursement 2009 Mailing Address 1127 11th St Ste 225 City State Zip Code Amount of Each Disbursement this Period Sacramento CA 95814-3809 1155.00 Purpose of Disbursement Committee accounting service 001 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 2994.06 SUBTOTAL of Disbursements This Page (optional) ... \blacktriangleright

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X)	Use sepa			OR LIN			R:		PAGE 26/33						
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NAME OF COMMITTEE (In Full) One Voice															
Full Name (Last, First, Middle Initial) Earl L. Plante							Date o		isburs				0 ŏ s	Y	
Mailing Address 372 Mariners Ct Apt F															
	State CA	Zip Code 94544-5573					Amou	nt o	f Each	D	isburse	-		-	-
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Earl L. Plante							Date o		isburs	em	ent		· · · · ·	Y	
Mailing Address 372 Mariners Ct Apt F							0 8		0	1	J L	2	0 0 9)	
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NAME OF COMMITTEE (In Full)															
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Full Name (Last, First, Middle Initial) Earl L. Plante									ion ID:		-	960			
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Full Name (Last, First, Middle Initial) U.S. Bank							Date	of D	ion ID: isburs	emen	_				
Mailing Address 621 Capitol Mall #110							1 1	М	[′] □ C	2	L	Ž	o ŏ	9 ^Y	
City Sacramento	State CA	Zip Code 95814					Amou	ınt o	f Each	Disb	urse	men	t this	Perio	d
Purpose of Disbursement Credit card fee				00	01								73.48	3	
Candidate Name			Ca	ate	gory/ pe										
Office Sought: House Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼													
									-	•		504	99.22	· · ·	$\overline{}$
SUBTOTAL of Disbursements This Page (optional)							<u> </u>	-	-		-	JU:	3 3 .2		=
TOTAL This Period (last page this line number only)					•										

•	C Form 3X)	Use sep	arate schedule(s)		FOR LIN (check or	_	3ER	l:		Р	AGE	28 / 3	33
TEMIZED DISBUF	RSEMENTS		category of the Summary Page	1-	X 21b 27	22 28		_	23 28b	24 280	F	25 29	
ny Information copied from for commercial purposes,													3
NAME OF COMMITTEE		e name and addre	555 of arry political	0011111	THILLOO TO C	JOHOIT OC	11010	Julio	10 110		001111	TIILLOC	
One Voice	- /												
Full Name (Last, First, M U.S. Bank	iddle Initial)									D186	435		
Mailing Address 621	Capitol Mall #1	10				1	2 ^M	/	^D 0	8 /	Y 2	o ŏ s) Y
City Sacramento		State CA	Zip Code 95814			Am	oun	t of E	Each	Disburs	emer	t this F	Peric
Purpose of Disbursemen						1 L					.3	90.23	3
NY event travel & cab far	<u>e</u>				003								
Candidate Name					tegory/ ype								
S	ouse Dis enate resident	sbursement For: Primary Other (spe	General										
State: Distri	ct:												
Full Name (Last, First, M U.S. Bank	iddle Initial)									D186 ment	461		
Mailing Address 621	Capitol Mall #1	10				1	2 ^M	′	^D 0	^D /	ÝŽ	o ŏ s) Y
City		State	Zip Code			Am	oun	t of E	Each	Disburs	emer	t this F	Perio
Sacramento		CA	95814			-	•		•			50.00)
Purpose of Disbursemen Credit card fee	Ť				001		•	0	-		-	50.00	
Candidate Name				Cat	tegory/ ype								
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State: District Full Name (Last, First, M													
U.S. Bank	iddie miliai)					Da	te of	Disl	ourse	D183 ment		, ° ' °	V
Mailing Address 621	Capitol Mall #1	10				1	0 ^M		0	1 /	, 2	0 0 9)
City Sacramento		State CA	Zip Code 95814			Am	oun	t of E	Each	Disburs	emer	t this F	Perio
Purpose of Disbursemen Credit card fee	t			(003	1 L					_	55.84	<u> </u>
Candidate Name				Cat	tegory/ ype								
S	ouse Dis enate resident	sbursement For: Primary Other (spe	General ecify) ▼										
State: Distri	ct:	`	··· •										

В.

C.

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 29/33 Use separate schedule(s) (check only one) for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) One Voice Full Name (Last, First, Middle Initial) Transaction ID: D180458 U.S. Bank Date of Disbursement 0 1 0 9 2009 Mailing Address 621 Capitol Mall #110 City State Zip Code Amount of Each Disbursement this Period CA 95814 Sacramento 51.25 Purpose of Disbursement Cedit card fees 001 Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: D177644 U.S. Bank Date of Disbursement 0 1 0 7 2009 Mailing Address 621 Capitol Mall #110 City State Zip Code Amount of Each Disbursement this Period Sacramento 95814 CA 2505.99 Purpose of Disbursement Payroll taxes 001 Candidate Name Category/ Туре Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: D177645 U.S. Bank Date of Disbursement 0 1 2009 Mailing Address 621 Capitol Mall #110 City State Zip Code Amount of Each Disbursement this Period Sacramento CA 95814 134.06 Purpose of Disbursement Credit card fee 001 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 2691.30 SUBTOTAL of Disbursements This Page (optional) ... \blacktriangleright

TOTAL This Period (last page this line number only)

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 30/33
ITEMIZED DISBURSEMENTS	for each category of the	(check only	one)
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	c and address of any pointed o		ion communications from Such committee
One Voice			
Full Name (Last, First, Middle Initial)			Transaction ID: D179084
U.S. Bank			Date of Disbursement
Mailing Address 621 Capitol Mall #110			$\begin{bmatrix} 0.8 & M \\ 0.8 & M \end{bmatrix} / \begin{bmatrix} 0.0 & D \\ 0.0 & 1 \end{bmatrix} / \begin{bmatrix} 0.0 & 0.0 & 0.0 \\ 0.0 & 0.0 & 0.0 \end{bmatrix}$
City Sacramento	State Zip Code CA 95814		Amount of Each Disbursement this Period
Purpose of Disbursement	0/1		50.00
Credit card fee		001	
Candidate Name		Category/ Type	
Office Sought: House Disburse	ement For:		
Senate President	Primary General Other (specify) ▼		
State: District:	Cirici (openity)		
Full Name (Last, First, Middle Initial)			Transaction ID: D177648
Earl L. Plante			Date of Disbursement
Mailing Address 372 Mariners Ct Apt F			07
City Hayward	State Zip Code CA 94544-5573		Amount of Each Disbursement this Period
Purpose of Disbursement	0.011.0070		324.45
Employee Benefits Candidate Name		001	
		Category/ Type	
Office Sought: House Disburse Senate	ement For: Primary General		
President	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) Kaiser Permanente			Transaction ID: D194322 Date of Disbursement
Mailing Address PO Box 7141			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix} $
	State Zip Code		Amount of Each Disbursement this Period
Pasadena Pishuranan	CA 91109-7141		324.45
Purpose of Disbursement Insurance - Medical		001	521.10
Candidate Name		Category/	
Office Sought: House Disburse	ement For:	Туре	[MEMO ITEM]
Senate	Primary General		
State: District:	Other (specify)		
2.2.100			
SUBTOTAL of Disbursements This Page (optional)			374.45

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LIN	E NUMBER:	PAGE 31/33					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1.5	X 21b 27	22 22	3 24 25 26 8b 28c 29 30b					
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full) One Voice										
Full Name (Last, First, Middle Initial) Earl L. Plante Mailing Address 372 Mariners Ct				Transaction Date of Disb	D179374 bursement 2 0 0 9					
Apt F City	State Zip Code			Amount of E	ach Disbursement this Period					
Hayward Purpose of Disbursement	CA 94544-5573	_			1629.64					
Fundraising Expenses Candidate Name		Ca	001 tegory/ ype							
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)									
Full Name (Last, First, Middle Initial) JetBlue Airways				Date of Disb	D D / Y Y Y Y					
Mailing Address PO Box 17435				0.8	01 2009					
,	State Zip Code UT 84117-0435			Amount of E	ach Disbursement this Period					
Purpose of Disbursement Air fare			002		359.20					
Candidate Name			tegory/ ype	 	-M1					
Senate President	ement For: Primary General Other (specify)			[INIZINIO ITE	-w1					
State: District: Full Name (Last, First, Middle Initial)				Transaction	ID: D194325					
Kaiser Permanente				Date of Disb	pursement					
Mailing Address PO Box 7141				08 7	0 1					
	State Zip Code CA 91109-7141			Amount of E	ach Disbursement this Period					
Purpose of Disbursement Insurance - Medical			001		324.45					
Candidate Name		Ca	tegory/ ype							
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		<u> </u>	[MEMO ITE	ЕМ]					
State: District:										
SUBTOTAL of Disbursements This Page (optional)			▶		1629.64					

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290// 10000120020			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check onl	NUMBER: PAGE 32 / 33 y one) 22 23 24 25 26
Any Information copied from such Reports and Statem		27	28a 28b 28c 29 30b
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) One Voice			
Full Name (Last, First, Middle Initial) NAACP			Transaction ID: D179378 Date of Disbursement
Mailing Address 663 35th St			08 0 0 1 7 2 0 0 9
City Oakland	State Zip Code CA 94609-2908		Amount of Each Disbursement this Period
Purpose of Disbursement Registration Package		001	300.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)	71	[MEMO ITEM]
State: District: Full Name (Last, First, Middle Initial)			
Earl L. Plante			Transaction ID: D180340 Date of Disbursement
Mailing Address 372 Mariners Ct Apt F			$ \begin{bmatrix} 0 & 9 & M \\ 0 & 1 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 0 & 1 \\ 0 & 1 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 0 & 1 \\ 0 & 1 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 0 & 1 \\ 0 & 1 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 0 & 1 \\ 0 & 0 & 1 \end{bmatrix} $
	State Zip Code CA 94544-5573		Amount of Each Disbursement this Period
Purpose of Disbursement Fundraising Expenses		001	1448.01
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: D193472
Staples			Date of Disbursement
Mailing Address 1230 Fitzgerald Dr			$ \begin{bmatrix} 0 & 9 & M \\ 0 & 1 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 0 & 1 \\ 0 & 1 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 2 & 0 & 0 & 9 \\ 0 & 2 & 0 & 0 & 9 \end{bmatrix} $
City Pinole	State Zip Code CA 94564-2252		Amount of Each Disbursement this Period
Purpose of Disbursement Printer/fax/copier		001	349.98
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		[MEMO ITEM]
State: District:	Other (apoony)		
SUBTOTAL of Disbursements This Page (optional)		>	1448.01

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 33/33
TEMIZED DISBURSEMENTS	for each category of the	(check only	<u> </u>
TEMPLED DIODOTTOLINETTO	Detailed Summary Page	X 21b	22 23 24 25 26
		27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem			
or for commercial purposes, other than using the name	and address of any political com	mittee to so	olicit contributions from such committee
NAME OF COMMITTEE (In Full)			
One Voice			
/			
Full Name (Last, First, Middle Initial)			Transaction ID: D193473
T-Mobile			Date of Disbursement
			09 D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 51843			09 01 2009
Oit.	Otata Zin Cada		Assessed of Feeth Bishows are addition Berind
,	State Zip Code CA 90051-6143		Amount of Each Disbursement this Period
	30031-0143		252.73
Purpose of Disbursement Telephone		001	202.70
Candidate Name		1 1	
Candidate Name		ategory/ Type	
Office Sought: House Disburse	ment For:	Турс	[MEMO ITEM]
Office Sought: House Disburse	Primary General		
President	,		
	Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	0.00
TOTAL This Period (last page this line number only)	•	46441.59